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School Based Clinics Electronic Health Record System Pre-Implementation Review

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Minneapolis
City of Lakes

Date: August 29, 2012

To: Gretchen Musicant, Minneapolis Department of Health and Family Support

Re: School Based Clinics - Electronic Health Record System Pre-Implementation Review

The Internal Audit Department (IA) conducted a pre-implementation review of the Minneapolis School Based Clinics' (SBC) Electronic Health Record system (EHR). This review was included in the 2011 Internal Audit Plan.

Background

SBC provides a variety of health care and counseling services to high school students at seven locations in Minneapolis Public High Schools. The SBC locations follow school hours and holidays and abide by the same confidentiality regulations applicable to other clinics. If the students and/or parents do not have insurance or medical assistance, payment for services provided will be waived. In 2011 the SBC served 2,231 high school students for a total of 10,140 visits.

The SBC program is not part of a health care system with an existing electronic health information system; therefore, they independently determined what kind of system would best meet their needs. SBC is confronting the need to meet the federal deadline for e-prescriptions and the 2015 deadline for effective use of electronic health records. Furthermore, there is a need to improve clinic efficiencies and clinic reimbursement from clinic billing, and meet the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirements.

The EHR system, NextGen, was chosen and provides SBC with the multiple levels of electronic security settings to set specific levels of access based on clinical role. The system allows reports to be generated to monitor staff use. Additionally, the system will have secure access to SBC client data via VPN tunnel and user password logins. The benefits expected as a result of implementing a fully operational electronic health record system are as follows:

- Staff will record client encounters more accurately and efficiently which allows saving staff time in follow-up and review;
- SBC managers will be able to more efficiently review records weekly for accuracy;
- Medical providers will be able to prescribe electronic medications that will save provider time and will allow for more accurate monitoring; and
- Ongoing quality assurance and improvement in that clinic activities (i.e. scheduling of clients, staffing needs, clinic volume, client outputs) will be monitored and improved on an on-going regular basis by SBC management.

Based on research performed of other providers, the best projections anticipated are increased clinic revenues and decreased need for contracted billing/data services once the system is fully functional. MDHFS has projected that 3rd party revenue will increase by at least 10% within a one year time frame ($30,000) and will be able to reduce contract expenses with outside vendors for data entry and report generating by 40% ($40,000). In addition, SBC will be eligible for the federal Medicaid EHR Incentive Program (via MN Department of Human Services).

Objectives

This review was performed to help ensure a successful implementation of the new electronic health record system at the SBC and to assess whether:

- Vendor selection processes included appropriate selection criteria;
- Controls are appropriately designed in the new system;
- End users understand their role in processing medical record information, are adequately trained and ensure controls are functioning properly;
- The new system has been tested to ensure it is functioning as intended;
- Logical and physical security access over Protected Health Information (PHI) are adequate; and
- Individually identifiable PHI is properly encrypted and adequately secured.

Scope

The scope of this review included the following areas:

- Gaining an understanding of how individually identifiable PHI is stored at the SBCs;
- Vendor selection criteria assessment;
- System pre-implementation review which included:
  - Operating System / Application Security;
  - Security Testing;
  - System & Data Backups;
  - Disaster Recovery Plans; and
  - Change Management;
  - Training Plan;
  - End User Acceptance;
- A privacy assessment of physical safeguards in place for electronic, paper and oral communication of PHI.

Conclusion

IA is pleased to acknowledge there were no reportable findings noted during this review. Minneapolis Department of Health and Family Support (MDHFS), Information Technology (IT) and the City Attorney's Office worked collaboratively with IA during this review to ensure a well-planned and successful implementation of the EHR system.

IA would like to extend our appreciation to MDHFS, IT and City Attorney personnel who assisted and cooperated with us during the review.

cc: Coral Garner, MDHFS
        Barbara Kyle, MDHFS
        Becky McIntosh, MDHFS
        Debra Parker, IT
        Susan Trammell, City Attorney's Office

Abbreviations Used Throughout the Report	
EHR	Electronic Health Records
MDHFS	Minneapolis Department of Health and Family Support
HIPAA	Health Insurance Portability and Accountability Act of 1996
IA	Internal Audit Department
IT	Information Technology Department
PHI	Protected Health Information
SBC	Minneapolis School Based Clinics
VPN	Virtual Private Network